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Substitute for form 1449/PTO		<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> (Use as many sheets as necessary)		Application Number	10/758,654
		Filing Date	01/15/2004
		First Named Inventor	Solhgim
		Art Unit	3711
		Examiner Name	PASSANITI
Sheet 1 of 1	Attorney Docket Number	KMC-607	

U. S. PATENT DOCUMENTS					
Examiner Initials*	Cite No.*	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code* (if known)			
SP		US- 5,830,765	05/1997	Moore, J.	
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		Country Code* Number* Kind Code* (if known)			

Examiner Signature	<i>A. Passaniti</i>	Date Considered	01-08-2005
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Sheet	<u>1</u>	of	<u>1</u>

## U. S. PATENT DOCUMENTS

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Examiner Signature	<i>L. Passaniti</i>	Date Considered	<i>01-08-2005</i>
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